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PTO/SB/21 (08-00)

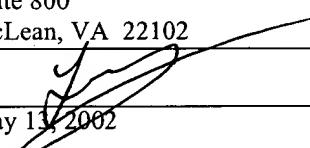
Approved for use through 10/31/2002. OMB 0651-0031

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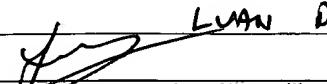
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/295,607
		Filing Date	April 22, 1999
		First Named Inventor	Shunpei YAMAZAKI et al.
		Group Art Unit	2811
		Examiner Name	Steven LOKE
Total Number of Pages in This Submission		Attorney Docket Number	740756-1961

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Other	RECEIVED MAY 20 2002 TO: 2800 MAIL ROOM			
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.					

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	<u>Luan C. Do, Reg. No. 38,434</u> Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102
Signature	
Date	May 13, 2002

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<div style="border: 1px solid black; padding: 2px; display: inline-block;">5/13/02</div>	
Type or printed name	Luan Do
Signature	
Date	May 13, 2002

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PTO/SB/17 (11-00)

2811

**FEES TRANSMITTAL
FOR FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$180.00)

Complete if Known

Application Number	09/295,607
Filing Date	April 22, 1999
First Named Inventor	Shunpei YAMAZAKI et al.
Examiner Name	Steven LOKE
Group Art Unit	2811
Attorney Docket No.	740756-1961

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **19-2380**

Deposit Account Name **Nixon Peabody LLP**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

1. **BASIC FILING FEE**

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. **EXTRA CLAIM FEES**

		Extra Claims	Fee from below	Fee Paid
Total Claims		-20**	= _____ X _____ = _____	
Independent Claims		-3**	= _____ X _____ = _____	
Multiple Dependent			_____ = _____	

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description (\$)
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. **ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge – late filing fee or oath	
127	50	227	25	Surcharge – late provisional filing fee or cover sheet	
139	130	139	130	Non-English transaction	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
141	1,280	241	640	Petition to revive – unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	180.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.29(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

* Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$)** **180.00**

CERTIFICATE OF MAILING

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Name _____

LOAN DO

SUBMITTED BY

Name (Print/Type)	Luan C. Do	Registration No. (Attorney/Agent)	38,434	Telephone	703-770-9300
Signature	<i>Luan C. Do</i>			Date	May 13, 2002